

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp

CALIFORNIA
2001/02
FORM

460

Page 1 of 36

For Official Use Only

Statement covers period

from 10/20/2002

through 12/31/2002

Date of election if applicable:
(Month, Day, Year)

11/05/2002

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee
☒ State Candidate Election Committee
☐ Recall
(Also Complete Part 5)

- ☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee

- ☐ Ballot Measure Committee
☐ Primarily Formed
☐ Controlled
☐ Sponsored
(Also Complete Part 6)

- ☐ Primarily Formed Candidate/
Officeholder Committee
(Also Complete Part 7)

2. Type of Statement:

- ☐ Preelection Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)

- ☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1239474

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Nakanishi for Assembly 2002

STREET ADDRESS (NO P.O. BOX)

1812 W. Kettleman Lane, # 3

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Lodi, CA 95242

209/368-0843

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

209/366-1228

Treasurer(s)

NAME OF TREASURER

Vona L. Copp

MAILING ADDRESS

8958 Ivanpah Court

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Elk Grove, CA 95624

916/686-1815

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1/21/03
Date

Executed on 1/17/03
Date

Executed on _____
Date

Executed on _____
Date

By Vona L. Copp
Signature of Treasurer or Assistant Treasurer

By [Signature]
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By _____
Signature of Controlling Officeholder, Candidate, State Measure Proponent

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee
Campaign Statement
Cover Page — Part 2

Type or print in ink

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Dr. Alan Nakanishi

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
State Assembly Person

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
1136 Junewood Court Lodi, CA 95242

Related Committees Not Included in this Statement: *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
Nakanishi for Senate	991831

NAME OF TREASURER	I CONTROLLED COMMITTEE?
Vona L. Copp	

COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
1136 Junewood Court	
CITY	STATE ZIP CODE AREA CODE/PHONE
Lodi, CA 95242	209/369-1826

COMMITTEE NAME	I.D. NUMBER
Nakanishi for Assembly	980198
NAME OF TREASURER	CONTROLLED COMMITTEE?
Jon Nakanishi	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

1136 Junewood Court	STATE	ZIP CODE	AREA CODE/PHONE
CITY			
Lodi, CA 95242			209/369-1826

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7.

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>		CALIFORNIA FORM 460
		Page <u>3</u> of <u>36</u>
NAME OF FILER Nakanishi for Assembly 2002		I.D. NUMBER 1239474

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 130,633.32	\$ 695,583.54
2. Loans Received	Schedule B, Line 3	-10,000.00	95,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 120,633.32	\$ 790,583.54
4. Nonmonetary Contributions	Schedule C, Line 3	12,797.82	71,366.80
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 133,431.14	\$ 861,950.34

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ 396,490.18	\$ 428,460.16
21. Expenditures Made	\$ 384,908.99	\$ 521,721.15

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$ 139,639.59	\$ 867,747.11
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 139,639.59	\$ 867,747.11
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	495.56	714.40
10. Nonmonetary Adjustment	Schedule C, Line 3	12,797.82	71,366.80
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 152,932.97	\$ 939,828.31

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
11 / 05 / 2002	\$ 487,155.64
03 / 05 / 2002	\$ 399,648.05
____ / ____ / ____	\$ _____
____ / ____ / ____	\$ _____
____ / ____ / ____	\$ _____
____ / ____ / ____	\$ _____

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 24,674.97
13. Cash Receipts	Column A, Line 3 above	120,633.32
14. Miscellaneous Increases to Cash	Schedule I, Line 4	651.86
15. Cash Payments	Column A, Line 8 above	139,639.59
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 6,320.56

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$ 0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ 95,714.40

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from 10/20/2002 through 12/31/2002	CALIFORNIA FORM 460
Page 4 of 36	I.D. NUMBER 1239474

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/21/2002	Associated General Contractors Political Action Committee of Ca. (#890194) 3095 Beacon Blvd. West Sacramento, CA 95691	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	G 02 3,000.00
10/21/2002	California Beer & Beverage Distributors (#761487) 1 Capitol Mall, Ste. 230 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00	2,000.00	G 02 2,000.00
10/21/2002	California Independent Oil Marketers Political Action Committee (#760982) 3831 N. Freeway Blvd., Ste.130 Sacramento, CA 95834	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 02 500.00
10/21/2002	California Print PAC (#830219) 5800 S. Eastern Ave., Ste. 400 Los Angeles, CA 90091	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	1,500.00	G 02 1,500.00
10/21/2002	Committee To Elect Tom Harman (#1234355) 22032 Capistrano Lane Huntington Beach, CA 92646	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
SUBTOTAL \$				6,500.00		

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 130,533.32
- Amount received this period – unitemized contributions of less than \$100 \$ 100.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 130,633.32

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from <u>10/20/2002</u>		
through <u>12/31/2002</u>		Page <u>5</u> of <u>36</u>
NAME OF FILER Nakanishi for Assembly 2002		I.D. NUMBER 1239474

SEE INSTRUCTIONS ON REVERSE

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/21/2002	Committee to Elect William J. 'Pete' Knight (#910804) 208 Shirley Lane Palmdale, CA 93551	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	G 02 3,000.00
10/21/2002	Farmers Group Inc. 4680 Wilshire Blvd. LosAngeles, CA 90010-3807	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	3,000.00	P 02 1,000.00 G 02 2,000.00
10/21/2002	Greater Anesthesia Service and Political Action Committee (GASPAC) (#760981) 1650 South Amphlett Blvd., Ste. 212 San Mateo, CA 94402	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,500.00	P 02 500.00 G 02 1,000.00
10/21/2002	Ralph's Grocery Store 1100 West Artesia Blvd. Compton, CA 90220	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
10/21/2002	The Doctors' Company PAC (#923140) 185 Greenwood Road Napa, CA 94558	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	3,000.00	G 02 3,000.00
10/21/2002	Twin Vines 19365 Windwood Drive Woodbridge, CA 95258	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		300.00	300.00	G 02 300.00
SUBTOTAL \$				8,300.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>	CALIFORNIA FORM 460 Page <u>6</u> of <u>36</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/22/2002	California Cable & Telecommunications Assoc. PAC (#745932) 4341 Piedmont Ave. Oakland, CA 94611	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 02 500.00
10/22/2002	Californians Allied for Patient Protection Political Action Committee (#920780) 1127 11th St., Ste. 300 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	G 02 3,000.00
10/22/2002	Cimorelli Construction Company 11390 Sunrise Gold Circle, #100 Rancho Cordova, CA 95742	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00	1,625.00	G 02 1,625.00
10/22/2002	Dial Medical Services Corp dba Pro-Care Home Health Services 7880 Alta Valley Way, Ste. # 103 Sacramento, CA 95823	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	G 02 3,000.00
10/23/2002	Collins Electrical Company Inc. 611 W. Fremont Street Stockton, CA 95203	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,500.00	P 02 1,500.00 G 02 1,000.00
10/23/2002	Snider Executive Office 5150 Madison Avenue Sacramento, CA 95841	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	3,000.00	P 02 3,000.00 G 02 3,000.00

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from <u>10/20/2002</u>		
through <u>12/31/2002</u>		Page <u>7</u> of <u>36</u>

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Nakanishi for Assembly 2002

I.D. NUMBER

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/23/2002	The Eureka Majority PAC (#1240002) 8958 Ivanpah Court Elk Grove, CA 95624	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	G 02 3,000.00
10/24/2002	AM Stephens Construction Inc. P.O. Box 1867 Lodi, CA 95241	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		300.00	1,300.00	P 02 1,000.00 G 02 300.00
10/24/2002	JobsPAC (#911819) 770 L Street, Ste. 800 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,300.00	G 02 1,300.00
10/24/2002	William Kagawa 1114 S. Pleasant Avenue Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100.00	300.00	P 02 100.00 G 02 200.00
10/24/2002	Sacramento County Republican Party (#910414) 1329 Howe Ave., Ste. 209 Sacramento, CA 95825	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		20,000.00	20,000.00	G 02 20,000.00
10/24/2002	Yuba County Republican Central Committee (#950271) 330 9th St., Ste. 1 Marysville, CA 95901	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		20,000.00	20,000.00	G 02 20,000.00
SUBTOTAL \$				44,400.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from <u>10/20/2002</u>	through <u>12/31/2002</u>	
		Page <u>8</u> of <u>36</u>

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NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/25/2002	Charles D. Blackburn 10082 E. Eight Mile Stockton, CA 95212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO National CA Gourmet Foods - NCG Foods	300.00	300.00	G 02 300.00
10/25/2002	Andrew Chen M.D. 521 S. Ham Lane, Ste. A Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Delta Eye Medical Group	1,500.00	1,500.00	P 02 1,500.00 G 02 1,500.00
10/25/2002	George Brinnig, Ph.D., M.D., Comprehensive Ophthalmology 1130 Coffee Road, Ste. 3-B Modesto, CA 95355	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,300.00	P 02 300.00 G 02 1,000.00
10/25/2002	Granite Construction Company P.O. Box 50085 Watsonville, CA 95077	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,650.00	P 02 1,150.00 G 02 1,500.00
10/25/2002	McDonald's California operators Political Action Committee (#782257) 1127 - 11th Street, Ste. 300 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
10/25/2002	Nicolas S. Veaco, M.D., D.D.S. 4444 Feather River Dr., Apt. 56 Stockton, CA 95219	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 02 500.00
SUBTOTAL \$				5,300.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>	CALIFORNIA FORM 460 Page <u>9</u> of <u>36</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/25/2002	Volcano Telephone Co. P.O. Box 1070 Pine Grove, CA 95665	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 02 500.00
10/26/2002	Robert L. French 5713 Pintail Court Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President R.L. French Properties	1,000.00	6,000.00	P 02 3,000.00 G 02 3,000.00
10/26/2002	Robert L. French 5713 Pintail Court Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President R.L. French Properties	1,000.00	6,000.00	P 02 3,000.00 G 02 3,000.00
10/26/2002	TOMPAC Non-Federal P.O. Box 16496 Arlington, VA 22215	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	P 02 3,000.00
10/28/2002	Butte County Republican Central Committee State Account (#741598) P.O. Box 3873 Chico, CA 95927	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> SCC		14,600.00	14,600.00	G 02 14,600.00
10/28/2002	California Credit Union League Political Action Committee (#780225) 9600 Cleveland Ave., Ste. 200 Rancho Cucamonga, CA 91730	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
SUBTOTAL \$				21,100.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from <u>10/20/2002</u>		
through <u>12/31/2002</u>		Page <u>10</u> of <u>36</u>

SEE INSTRUCTIONS ON REVERSE

Nakanishi for Assembly 2002

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/28/2002	DeimierChrysler Corporation Political Support Committee 1000 Chrysler Drive Auburn Hills, MI 48326	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
10/28/2002	Maze for Assembly (#1239089) 1601 W. Cherry Visalia, CA 93277	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	3,000.00	G 02 3,000.00
10/28/2002	Pacific Bell/Pacific Telesis Group (#981470) 140 New Montgomery Street, Rm. 2237 San Francisco, CA 94105	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
10/28/2002	Re-Elect Assemblyman Jay LaSuer (#1235259) P.O. Box 2407 La Mesa, CA 91943	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,500.00	G 02 1,500.00
10/28/2002	Western Growers Political Action Committee - California (#743897) 17620 Fitch Street Newport Beach, CA 92658	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
		<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				G 02 3,000.00 P 02 3,000.00
SUBTOTAL \$				8,000.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>	CALIFORNIA FORM 460
Page <u>11</u> of <u>36</u>	

SEE INSTRUCTIONS ON REVERSE

Nakanishi for Assembly 2002

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/30/2002	AT&T 1121 L Street, Ste. 801 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 02 500.00
10/30/2002	Behroze F. Buhari 3826 14 Mile Drive Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Stockton Cardiology	150.00	1,150.00	P 02 1,000.00 G 02 150.00
10/30/2002	Alvin C. Cacho P.O. Box 8276 Stockton, CA 95208	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician San Joaquin Cardiology	150.00	150.00	G 02 150.00
10/30/2002	Perry Diaz 9524 Swanbrook Court Elk Grove, CA 95758	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	State Chairman Filipino-American Republican Council of CA	100.00	100.00	G 02 100.00
10/30/2002	Dr. Gurinder Singh Grewal 830 Liberty Court Tracy, CA 95376	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician San Joaquin Cardiology	150.00	350.00	P 02 200.00 G 02 150.00
10/31/2002	California Victory Fund (#1249317) 260 Sheridan Ave., Ste. 200 Palo Alto, CA 94306	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
SUBTOTAL \$				2,050.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period
 from 10/20/2002
 through 12/31/2002

CALIFORNIA
FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/31/2002	Carmine A. Cammarosano 39442 Blackhawk Place Davis, CA 95616	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	166.66	166.66	G 02 166.66
10/31/2002	Gerald N. Bock, M.D., Inc. 1502 St. Marks Plaza, Ste. 8 & 9 Stockton, CA 95207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 02 500.00
10/31/2002	Kenneth K. Sasaki 20033 N. Kennefick Road Acampo, CA 95220	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Manager Lodi Export	300.00	300.00	G 02 300.00
10/31/2002	Gary Scannavino 5463 Cherokee Road Stockton, CA 95215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Trucker Cherokee Trucking	500.00	500.00	G 02 500.00
10/31/2002	Lydia Wyrzes M.D. 4925 J Street Sacramento, CA 95818	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	166.66	166.66	G 02 166.66
11/01/2002	GlaxoSmithKline P.O. Box 13681 Philadelphia, PA 19101	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		650.00	2,150.00	G 02 2,150.00
SUBTOTAL \$				2,283.32		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from <u>10/20/2002</u>	through <u>12/31/2002</u>	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Nakanishi for Assembly 2002	I.D. NUMBER 1239474
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/02/2002	CAUSE Independent Expenditure (#970375) 2029 H Street Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
11/02/2002	Aymey Liem 5371 Tudor Rose Glen Stockton, CA 95212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100.00	650.00	P 02 250.00 G 02 400.00
11/02/2002	Arnold M. Zeiderman 13250 Shake Ridge Road Sutter Creek, CA 95685	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	G 02 500.00
11/04/2002	BIPAC of the Delta (#881369) 1150 W. Robinwood Dr., Ste. 4C Stockton, CA 95207	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	G 02 100.00
11/04/2002	Praxedes B. Demesa 10740 N. Oakwilde Avenue Stockton, CA 95212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Nursing Home Administrator Pleasant Care Corp.	1,000.00	5,000.00	P 02 2,000.00 G 02 3,000.00
		<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				P 02 2,000.00 G 02 3,000.00
SUBTOTAL \$				4,700.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>		CALIFORNIA FORM 460 Page <u>14</u> of <u>36</u> I.D. NUMBER 1239474

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/04/2002	Farmers Employees & Agents Political Action Committee (#901422) 591 Redwood Hwy., Ste. 4000 Mill Valley, CA 94941	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	6,000.00	P 02 3,000.00 G 02 3,000.00
11/04/2002	Farmers Employees & Agents Political Action Committee (#901422) 591 Redwood Hwy., Ste. 4000 Mill Valley, CA 94941	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	6,000.00	P 02 3,000.00 G 02 3,000.00
11/04/2002	Good Samaritan Rehab & Care Center 711 W. Robinhood Dr. Stockton, CA 95207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	G 02 3,000.00
11/04/2002	Arlene N. Graves 251 E. Pearl Ct., Ste. A Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	150.00	150.00	G 02 150.00
11/04/2002	Ralph H. Harder M.D. P.O. Box 1584 Jackson, CA 95642	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired n/a	50.00	100.00	P 02 50.00 G 02 50.00
11/04/2002	Kelvin Loh M.D. 686 Piroppo Court Camarillo, CA 93010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Self-Employed	200.00	700.00	P 02 500.00 G 02 200.00
SUBTOTAL \$				9,400.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period

from 10/20/2002

through 12/31/2002

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Nakanishi for Assembly 2002

I.D. NUMBER

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
11/04/2002	Sharon Runner for Assembly (#1238181) 43759 15th Street, West, PMB 36 Lancaster, CA 93534	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	G 02 3,000.00
11/05/2002	AKF Development, LLC 1132 Norman Drive Manteca, CA 95337	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	G 02 1,000.00
11/05/2002	MDEYEPAC of California (#841539) 605 Market St., Ste. 1109 San Francisco, CA 94105	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 02 3,000.00 G 02 1,000.00
11/06/2002	Norren M. Basso 6277 Crooked Stick Circle Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	500.00	500.00	G 02 500.00
11/08/2002	Norcal Mutual Insurance Company 560 Davis Street, 2nd Floor San Francisco, CA 94111	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,000.00	3,000.00	P 02 3,000.00 G 02 3,000.00
12/30/2002	Awin Management, Inc. 15880 N. Greenway-Hayden Loop, Ste. 100 Scottsdale, AZ 85260	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 02 1,000.00
SUBTOTAL \$				9,500.00		

Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE A

Statement covers period		CALIFORNIA FORM 460
from <u>10/20/2002</u>		
through <u>12/31/2002</u>		Page <u>16</u> of <u>36</u>

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NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12/31/2002	Snider Executive Office 5150 Madison Avenue Sacramento, CA 95841	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		-1,000.00	3,000.00	P 02 3,000.00 G 02 3,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				-1,000.00		

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 10/20/2002
through 12/31/2002

CALIFORNIA
FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Alan S. Nakanishi M.D. 1136 Junewood Court Lodi, CA 95240 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Delta Eye Medical Group	\$ 40,000.00	\$ 0.00	<input checked="" type="checkbox"/> PAID \$ 5,000.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 35,000.00 12/31/2002 DATE DUE	0.00 % RATE \$ 0.00	\$ 40,000.00 12/31/2001 DATE INCURRED	CALENDAR YEAR \$ 60,120.00 PER ELECTION** P 02 93,120.00 G 02 0.00
Alan S. Nakanishi M.D. 1136 Junewood Court Lodi, CA 95240 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Delta Eye Medical Group	\$ 40,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 40,000.00 DATE DUE	0.00 % RATE \$ 0.00	\$ 40,000.00 02/16/2002 DATE INCURRED	CALENDAR YEAR \$ 60,120.00 PER ELECTION** P 02 93,120.00 G 02 0.00
Alan S. Nakanishi M.D. 1136 Junewood Court Lodi, CA 95240 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Delta Eye Medical Group	\$ 18,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 18,000.00 DATE DUE	0.00 % RATE \$ 0.00	\$ 18,000.00 03/05/2002 DATE INCURRED	CALENDAR YEAR \$ 60,120.00 PER ELECTION** P 02 93,120.00 G 02 0.00
SUBTOTALS \$		0.00	\$ 5,000.00	\$ 93,000.00	\$ 0.00			

Schedule B Summary

(Enter (g) on
Schedule E, Line 3)

- Loans received this period \$ 5,000.00
(Total Column (b) plus unitemized loans less than \$100.)
- Loans paid or forgiven this period \$ 15,000.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ -10,000.00
(May be a negative number)

*Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

† Contributor Codes

IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other PTY – Political Party SCC – Small Contributor Committee

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from 10/20/2002 through 12/31/2002	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Friends of Mark Wyland (#990712) 330 Encinitas Blvd., Ste. 1001 Encinitas, CA 92024 † <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 2,000.00	\$ 0.00	<input checked="" type="checkbox"/> PAID \$ 2,000.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 0.00	0.00 % RATE \$ 0.00	\$ 2,000.00	CALENDAR YEAR \$ 2,000.00 PER ELECTION** G 02 0.00 05/31/2002 DATE INCURRED
Alan S. Nakanishi M.D. 1136 Junewood Court Lodi, CA 95240 † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Delta Eye Medical Group	\$ 2,000.00	\$ 0.00	<input checked="" type="checkbox"/> PAID \$ 2,000.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 0.00	0.00 % RATE \$ 0.00	\$ 2,000.00	CALENDAR YEAR \$ 60,120.00 PER ELECTION** P 02 93,120.00 G 02 0.00 06/28/2002 DATE INCURRED
Doug La Malfa for State Assembly (#1239893) 3881 Benatar Way, Ste. G Chico, CA 95928 † <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 3,000.00	\$ 0.00	<input checked="" type="checkbox"/> PAID \$ 3,000.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 0.00	0.00 % RATE \$ 0.00	\$ 3,000.00	CALENDAR YEAR \$ 3,000.00 PER ELECTION** G 02 0.00 06/29/2002 DATE INCURRED
SUBTOTALS \$		0.00	\$ 7,000.00	\$ 0.00	\$ 0.00	0.00		

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ 5,000.00
(Total Column (b) plus unitemized loans less than \$100.)
- Loans paid or forgiven this period \$ 15,000.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.)..... **NET \$** -10,000.00
(May be a negative number)
Enter the net here and on the Summary Page, Column A, Line 2.

*Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

† Contributor Codes

IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other PTY – Political Party SCC – Small Contributor Committee

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period from 10/20/2002 through 12/31/2002	CALIFORNIA FORM 460
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Nakanishi for Assembly 2002

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FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Sharon Runner for Assembly (#1238181) 43759 15th Street, West, PMB 36 Lancaster, CA 93534 † <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 0.00	\$ 3,000.00	<input type="checkbox"/> PAID \$ 0.00 <input checked="" type="checkbox"/> FORGIVEN \$ 3,000.00	\$ 0.00 DATE DUE	0.00 % RATE \$ 0.00	\$ 3,000.00 10/25/2002 DATE INCURRED	CALENDAR YEAR \$ 3,000.00 PER ELECTION** G 02 3,000.00
Pat Bates for Assembly 2002 (#1233359) 31631 Sea Shadows Way Laguna Niguel, CA 92677 † <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ 0.00	\$ 2,000.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 2,000.00 09/30/2003 DATE DUE	0.00 % RATE \$ 0.00	\$ 2,000.00 10/26/2002 DATE INCURRED	CALENDAR YEAR \$ 2,000.00 PER ELECTION** G 02 2,000.00
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$ DATE DUE	% RATE \$	\$ DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS \$		5,000.00	\$ 3,000.00	\$ 2,000.00	\$ 0.00			

Schedule B Summary

(Enter (e) on
Schedule E, Line 3)

- Loans received this period \$ 5,000.00
(Total Column (b) plus unitemized loans less than \$100.)
- Loans paid or forgiven this period \$ 15,000.00
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) **NET \$** -10,000.00
(May be a negative number)
Enter the net here and on the Summary Page, Column A, Line 2.

*Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

† Contributor Codes

IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other PTY – Political Party SCC – Small Contributor Committee

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Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

Statement covers period from 10/20/2002 through 12/31/2002	CALIFORNIA FORM 460
	I.D. NUMBER 1239474

NAME OF FILER

Nakanishi for Assembly 2002

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/21/200	Jeannette W. Cline 9127 S. Camden Way Elk Grove. CA 95624	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Wilhoit-Cline & Assoc.	Event dinner	167.82	167.82	G 02 167.82
10/23/200	California Republican Party (#810163) 1903 W. Magnolia Blvd. Burbank, CA 91506 Political party non-monetary contribution not subject to candidate spending limit.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		Polling information	1,350.00	109,110.80	G 02 105,839.56
10/31/200	California Republican Party (#810163) 1903 W. Magnolia Blvd. Burbank, CA 91506 Political party non-monetary contribution not subject to candidate spending limit.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input checked="" type="checkbox"/> PTY <input type="checkbox"/> SCC		Consultant fees and polling information	11,280.00	109,110.80	G 02 105,839.56
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 12,797.82

Schedule C Summary

- Amount received this period – nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.) \$ 12,797.82
- Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ 0.00
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL \$ 12,797.82**

*Contributor Codes

IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
from 10/20/2002		
through 12/31/2002		Page 21 of 36
NAME OF FILER Nakanishi for Assembly 2002		I.D. NUMBER 1239474

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento CA 95814	LIT		11,800.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento CA 95814		Phonebank & mass mailer	15,012.32
AT&T P.O. Box 78522 Phoenix AZ 85062	OFC		84.02

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$ 26,896.34

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ 139,599.59
2. Unitemized payments made this period of under \$100	\$ 40.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$ 139,639.59

Schedule E (Continuation Sheet)
Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period from 10/20/2002 through 12/31/2002	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento CA 95814	POS		26,500.00
Andrew Mercy 1313 Robinhood Dr., Bldg. B Stockton CA 95207	OFC		134.82
Wendy Warfield & Associates 921 11th Street, Ste. 110 Sacramento CA 95814	PRO		5,215.24
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento CA 95814	LIT		40,871.67
Vona Copp 8958 Ivanpah Court Elk Grove CA 95624	PRO		2,610.32
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$ 75,332.05

Schedule E (Continuation Sheet)
Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
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through	12/31/2002	Page 23 of 36
NAME OF FILER Nakanishi for Assembly 2002		I.D. NUMBER 1239474

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento CA 95814			Phonebanks & Mailers	26,387.74
David S. Loudon 8500 Delahye Circle Sacramento CA 95828			Signs, postage & office supplies	1,873.32
Wendy Warfield & Associates 921 11th Street, Ste. 110 Sacramento CA 95814	OFC			190.62
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento CA 95814			Website, telephone & phonebanks	413.71
Aaron Bone 5307 El Camino Avenue, Apt. #11 Carmichael CA 95608			Office supplies & mileage	648.18

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Vona Copp 8958 Ivanpah Court Elk Grove CA 95624	PRO		456.30
David S. Loudon 8500 Delahye Circle Sacramento CA 95828	CNS		5,000.00
David S. Loudon 8500 Delahye Circle Sacramento CA 95828		Office supplies & hotel expense	515.31
Andrew Mercy 1313 Robinhood Dr., Bldg. B Stockton CA 95207	CNS		1,500.00
Pacific Bell Payment Center Sacramento CA 95887-0001	OFC		253.19

Schedule E (Continuation Sheet)
Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

Statement covers period		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wendy Warfield & Associates 921 11th Street, Ste. 110 Sacramento CA 95814	OFC		8.39
AT&T P.O. Box 78522 Phoenix AZ 85062	OFC		124.44
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.			SUBTOTAL \$ 132.83

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>		CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Andrew Mercy 1313 Robinhood Dr., Bldg. B Stockton CA 95207	OFC	134.82	0.00	134.82	0.00
Wendy Warfield & Associates 921 11th Street, Ste. 110 Sacramento CA 95814	OFC	0.00	131.00	0.00	131.00
Vona Copp 8958 Ivanpah Court Elk Grove CA 95624	PRO	0.00	248.40	0.00	248.40

* Payments that are contributions or independent expenditures must also be
summarized on Schedule D.

SUBTOTALS \$ 134.82 \$ 379.40 \$ 134.82 \$ 379.40

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 714.40
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 218.84
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 495.56
May be a negative number

Schedule F (Continuation Sheet)
Accrued Expenses (Unpaid Bills)

 Type or print in ink.
 Amounts may be rounded
 to whole dollars.

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
San Joaquin County Registrar of Voters 212. N. San Joaquin Street Stockton CA 95202	FIL	0.00	335.00	0.00	335.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.		SUBTOTALS \$	0.00 \$	335.00 \$	0.00 \$ 335.00

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE G

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>	CALIFORNIA FORM 460 Page <u>28</u> of <u>36</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Aaron Bone

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Cingular Wireless P.O. Box 60017 Los Angeles CA 90060	OFC		116.91
Cingular Wireless P.O. Box 60017 Los Angeles CA 90060	OFC		161.41

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 278.32

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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 FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE G

Statement covers period from <u>10/20/2002</u>	CALIFORNIA FORM 460
through <u>12/31/2002</u>	
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Johnson Clark Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. Postmaster 2000 Royal Oaks Drive Sacramento CA 95813	LIT		11,800.00
G. Strahan 7752 Robert's River Way Sacramento CA 95831	LIT		2,014.15
Greensburgh Group 245 Fischer Avenue, C-3 Costa Mesa CA 92626	LIT		644.34
Greensburgh Group 245 Fischer Avenue, C-3 Costa Mesa CA 92626	LIT		614.27

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 15,072.76

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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FPPC Form 460 (June/01)
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Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE G

Statement covers period from <u>10/20/2002</u> through <u>12/31/2002</u>	CALIFORNIA FORM 460 Page <u>30</u> of <u>36</u>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Assembly 2002

I.D. NUMBER

1239474

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Johnson Clark Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tony Siciliani 3003 O Street Sacramento CA 95814	LIT			1,685.00
Voter Connect Comm., Inc. 2377 Gold Meadow Way Gold River CA 95670	PHO			7,244.00
U.S. Postmaster 2000 Royal Oaks Drive Sacramento CA 95813	POS			12,000.00
G. Strahan 7752 Robert's River Way Sacramento CA 95831	LIT			9,526.46

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 30,455.46

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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 FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE G

Statement covers period from <u>10/20/2002</u>	CALIFORNIA FORM 460
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Nakanishi for Assembly 2002

I.D. NUMBER

1239474

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Johnson Clark Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Greensburgh Group 245 Fischer Avenue, C-3 Costa Mesa CA 92626	LIT		823.36
Greensburgh Group 245 Fischer Avenue, C-3 Costa Mesa CA 92626	LIT		916.68
JC Evans Communications 11230 Gold Express Drive, Ste. 310 Gold River CA 95670	LIT		1,800.00
JC Evans Communications 11230 Gold Express Drive, Ste. 310 Gold River CA 95670			1,800.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 5,340.04

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tony Siciliani 3003 O Street Sacramento CA 95814	LIT		7,786.08
Dane & Assoc. 4259 El Carnal Way Las Vegas NV 89121	PHO		964.08
Greensburgh Group 245 Fischer Avenue, C-3 Costa Mesa CA 92626	LIT		809.06
JC Evans Communications 11230 Gold Express Drive, Ste. 310 Gold River CA 95670	LIT		1,998.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 11,557.22

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Schedule G

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SCHEDULE G

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Johnson Clark Associates

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CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tony Siciliani 3003 O Street Sacramento CA 95814	LIT		8,156.65
U.S. Postmaster 2000 Royal Oaks Drive Sacramento CA 95813	POS		11,508.34

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 19,664.99

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SCHEDULE G

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NAME OF AGENT OR INDEPENDENT CONTRACTOR

David S. Loudon

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Lowe's 8369 Power Inn Road Elk Grove CA 95624	CMP	Sign hardware	128.58
U.S. Postmaster Lodi Post Office Lodi CA 95240	POS	Bulk Mail Permit	150.00
U.S. Postmaster Arch Road Post Office Stockton CA 95213	POS		200.00
U.S. Postmaster Lodi Post Office Lodi CA 95240	POS		298.37

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 776.95

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Schedule G
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SCHEDULE G

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Nakanishi for Assembly 2002

NAME OF AGENT OR INDEPENDENT CONTRACTOR

David S. Louden

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. Postmaster Lodi Post Office Lodi CA 95240	POS		825.54
Residence Inn Stockton 3240 March Lane Stockton CA 95219	TRS		368.28

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 1,193.82

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Schedule I
Miscellaneous Increases to Cash

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SCHEDULE I

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DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
12/20/2002	Pacific Bell Payment Center Sacramento, CA 95887-0001	Telephone refund	398.67
12/20/2002	Pacific Bell Payment Center Sacramento, CA 95887-0001	Telephone refund	253.19

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 651.86

Schedule I Summary

1. Increases to cash of \$100 or more this period. \$ 651.86
 2. Unitemized increases to cash under \$100 this period. \$ 0.00
 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... \$ 0.00
 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) **TOTAL \$** 651.86